

Mr. Speaker, when this President put his name on a casino, he left its workers in the dust. When he put his name on a university, he left its students out in the cold. And when he puts his name on this healthcare plan, TrumpCare, he is going to leave all of us sicker and poorer.

ACCESS TO AFFORDABLE HEALTH CARE

(Mr. VEASEY asked and was given permission to address the House for 1 minute.)

Mr. VEASEY. Mr. Speaker, 7 years ago today, President Barack Obama signed the Affordable Care Act into law. Since then, the ACA has helped millions of Americans gain access to affordable healthcare insurance.

We all know what is at stake in this Republican bill. It is a bill that actually has a big old tax in it called the age tax that makes our seniors pay more.

In addition to that, it prohibits Medicaid reimbursement for Planned Parenthood, and Republicans are actively working hard to make access to reproductive care even tougher for low-income women.

Let me tell you this about Texas: In 2014, Planned Parenthood had 34 centers that served over 120,000 women. Additionally, these centers in my home State of Texas provided birth control to over 93,000 women, conducted over 134,000 STD tests, 16,000 pap smears, and 16,000 mammograms.

These crucial services allow women across Texas to take control of their own health care and help them plan for a family when they are ready.

Republicans claim that their replacement plan puts patients first, but limiting a woman's ability to seek care when she seems fit directly contradicts that goal.

COMPOUNDING DEVASTATING CUTS AND ACCESS TO HEALTH CARE

(Mr. SUOZZI asked and was given permission to address the House for 1 minute.)

Mr. SUOZZI. Mr. Speaker, I rise in opposition to the Republicans' American Health Care Act and specifically the provision that purports to shift billions of Medicaid costs from New York's counties to the State.

In addition to the AHCA's age tax, increasing premiums, and millions losing their insurance, this provision will compound the devastating cuts and leave countless New Yorkers without access to health care while decimating New York State's finances.

This amendment requires the State to shoulder an additional \$2.3 billion on top of the \$1 billion cut proposed in the AHCA. Meanwhile, this proposal excludes New York City and only gives New York State 2 years to assume this burden.

As a former mayor, county executive, and former chairman of the New York

State Commission on Property Tax Relief, I understand that New York counties shoulder a larger share of the Medicaid burden than in any other State. Asking the State to relieve some of this burden from the counties that they bear from the Medicaid cost is a worthwhile idea that should be further explored, but in conjunction with State officials.

The short turnaround time in the current proposal would cripple the State's budget, resulting in catastrophic cuts, and leaves countless New Yorkers without access to health care.

Additionally, marrying this proposal to the misguided Republican AHCA plan and excluding New York City prevents bipartisan cooperation. Rushing this amendment without debate or full consideration of the consequences and without a plan for implementation will negate any positives.

I call upon my Republican colleagues to work in a bipartisan manner on this critical issue.

HEALTH MATTERS

(Mr. CLEAVER asked and was given permission to address the House for 1 minute.)

Mr. CLEAVER. Mr. Speaker, yesterday I spoke with a dynamic, impressive young woman, Maryn White, from Lee's Summit, Missouri.

Maryn is a 16-year-old sophomore at Lee's Summit West High School. When she was 10 years old, she was diagnosed with ulcerative colitis. Despite a lot of pain and a number of major surgeries, Maryn is active in her high school and is raising money for a cure.

Maryn was the winner of the Dream Factory of Kansas City. Instead of going on a cruise ship or some tour to an exotic place, she came to Washington to talk to people who are about to vote on her health. She is absolutely infuriated that money is not going to the NIH to continue to do research for a cure.

There are thousands of similar stories all over the country. This is not a political matter, this is a matter of life and death for people all over this country.

Yes, I am saying that TrumpCare will make America ache again.

FOCUS OUR ATTENTION ON MAKING A DIFFERENCE

(Mr. BLUMENAUER asked and was given permission to address the House for 1 minute.)

Mr. BLUMENAUER. Mr. Speaker, there was a television program some years ago that Monty Hall had: "Let's Make a Deal."

Well, up in the Rules Committee, we are acting out a congressional version of "Let's Make a Deal." People aren't dressing up like radishes and jumping up and down, but they are trying to contort the flawed Republican repeal of the Affordable Care Act into something that can somehow thread the needle

and get votes through the House of Representatives. Well, Mr. Speaker, it is unfortunate.

This week we are commemorating the seventh anniversary of the passage of the Affordable Care Act. We don't need costumes and jumping up and down. It has reduced the uninsured rate to the lowest in our history. It has strengthened rural and small town hospitals across the country. It has extended coverage to people who otherwise would not have it. Repeal of this amazing accomplishment would be unprecedented. It would be sad, and it would be wrong.

I sincerely hope that we are going to be able to focus our attention on something that will make a difference, not forcing Americans to pay more for inferior coverage and deny it to many others.

OPPOSING TRUMPCARE

(Mr. GENE GREEN of Texas asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GENE GREEN of Texas. Mr. Speaker, I rise to speak against TrumpCare.

TrumpCare will take health insurance away from 24 million Americans. That is basically the amount of people that live in the State of Texas.

For the lucky ones who don't have their health care ripped away, TrumpCare forces families to pay increased out-of-pocket costs and higher deductibles and cuts the financial assistance they get today to afford their insurance.

It has a crushing age tax. TrumpCare forces Americans who are aged 50 to 64 to pay premiums five times higher than younger people pay for health insurance.

This, combined with a slash in financial assistance to help people pay for coverage, will literally mean that there will be people who now have to pay more for their premiums annually than they actually earn in a year. That is unacceptable.

TrumpCare cuts Medicare and will shorten the life of the program by 3 years. It is hard to find someone this bill helps, but the people that it will hurt can be counted in the millions.

I urge my colleagues to vote against this horrible plan and to work with us to expand access and lower cost.

THE IMPACT OF TRUMPCARE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2017, the gentlewoman from Washington (Ms. JAYAPAL) is recognized for 60 minutes as the designee of the minority leader.

GENERAL LEAVE

Ms. JAYAPAL. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the subject of my Special Order.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Washington?

There was no objection.

Ms. JAYAPAL. Mr. Speaker, tomorrow we will be voting on the American Health Care Act. We are doing this in spite of the fact that we just found out that there is an even more dire and harsh plan. We still have not received the Congressional Budget Office's estimates of what that plan will do, but we do know that TrumpCare will throw at least 24 million people off of their health care.

Tonight, for the next hour, I am proud to help lead our Congressional Progressive Caucus Special Order hour with my distinguished members from the caucus.

I yield to the gentlewoman from New Jersey (Mrs. WATSON COLEMAN).

Mrs. WATSON COLEMAN. Mr. Speaker, as the gentlewoman from New Jersey said, my colleagues and I will show and prove our true intentions in occupying our seats here in Congress.

We will have the chance to stand with the 24 million Americans who have health coverage thanks to the Affordable Care Act or cosign billion-dollar tax cuts to the wealthy. We will have the chance to reject the attacks on the health of women and older Americans or force Americans to pay more for less. We will have the chance to choose between what is best for all or what is best for some. We will choose between right and wrong.

Changes to the current law proposed in the un-American Health Care Act, also known as TrumpCare, could result in cuts to benefits, increased costs, or reduced coverage for older Americans.

According to the 2016 Medicare Trustees Report, the Medicare part A trust fund is solvent until 2028. This is 11 years longer than predicted in 2009, due in large part to the changes made in the ACA.

Repealing the additional 0.9 percent payroll tax on high-income workers, as proposed in this new bill, would remove \$117.3 billion from the Hospital Insurance Trust Fund over the next 10 years. It would hasten the insolvency of Medicare by up to 4 years and diminish Medicare's ability to pay for services in the future.

Additionally, provisions of the un-American Health Care Act that create a per capita cap financing structure in the Medicaid program is equally dangerous. These provisions would endanger the health, safety, and care of millions of individuals who depend on the essential services provided through Medicaid.

The CBO found that the bill would cut Medicaid funding by \$880 billion over 2017 to 2026. Medicare and Medicaid must be protected and strengthened for older Americans and future generations.

Any healthcare legislation presented must take into consideration future generations of men and women who will take our seats in this Chamber, fu-

ture generations that will produce our first woman President, future generations of women that hopefully will not have to fight against men meddling in their healthcare decisions.

This bill is a war on women, and, quite frankly, there is nothing pro-life about it. This bill attacks women's access to reproductive health care from every angle, undermining not just contraception access and abortion coverage, but also making it much harder for women to receive maternity coverage when they do give birth.

The abortion rate is at a historic low, and most analysts say the principal reason is that the ACA made contraception cheaper and easier to obtain. The CBO report was all-encompassing, but most strikingly pointed out a provision that would undermine Planned Parenthood, a critical provider for women's health care.

□ 1615

This provision would bar women on Medicaid from using their coverage to go to Planned Parenthood, immediately resulting in many of these women losing access to contraception and leading to closing of clinics nationwide.

The CBO estimated that 15 percent of women living in low-income and otherwise underserved areas would lose their access to services to prevent pregnancy. In short, local access to reproductive health care dries up.

In short, this is unacceptable. Just as I opened, I am going to close. Tomorrow my colleagues and I will show and prove our true intentions in occupying our seats here in Congress. We will have the chance to stand with the 24 million Americans who have healthcare coverage thanks to the Affordable Care Act, or cosign billion-dollar tax cuts to the wealthy as proposed under the Trump healthcare bill.

We will have the chance to reject the attacks on the health of women and the working families or force Americans to pay far more for far less, and we will have the chance to choose between what is best for all or what is best for some. Tomorrow, with the votes cast on this bill, we will get the chance to choose between right and wrong.

Ms. JAYAPAL. Mr. Speaker, I thank Mrs. WATSON COLEMAN for her excellent statement.

Mr. Speaker, it is my great pleasure to yield to the distinguished gentleman from Rhode Island (Mr. CICILLINE).

Mr. CICILLINE. Mr. Speaker, I thank the gentlewoman for yielding.

In a very short number of weeks here in Congress, she has already made her mark as a passionate advocate not only for her State, but in this important fight to protect access to affordable, quality health care, and she has been an extraordinary member of the Judiciary Committee. It has been an honor to serve with her, and I thank her for yielding and thank her for her great leadership.

Mr. Speaker, we are here to continue our fight to protect access to quality, affordable health care and to defeat TrumpCare.

TrumpCare will produce higher costs for our constituents, forcing families to pay higher premiums, higher deductibles, and higher out-of-pocket expenses.

It also will provide less Americans coverage. According to the nonpartisan Congressional Budget Office, 24 million Americans will lose their health insurance when TrumpCare becomes law.

Thirdly, it imposes a crushing age tax. TrumpCare allows individuals age 50 to 64 to pay premiums five times higher than others pay for health care, no matter how healthy they are.

It is higher premiums, higher deductibles, higher out-of-pocket expenses, 24 million people will lose insurance, older people will pay an age tax. And TrumpCare, in addition to all of those terrible things, shortens the life of the Medicare trust fund by 3 years and ransacks the funds that seniors depend on, particularly, to get their long-term care. And finally, the best estimates are that it will destroy nearly 2 million jobs in this country if passed.

So why is this happening? Why would someone construct a bill that does this?

Well, in large part, it is to finance an extraordinarily big tax cut, a tax cut for the wealthiest people in this country. The richest 400 families will receive a tax cut, each, of about \$7 million. Then there are tax cuts for drug companies, insurance company CEOs.

And to finance this tax cut, which totals \$600 billion over the decade, in order to finance that, this bill robs 24 million Americans of health insurance, cheats seniors out of the care that they deserve in nursing homes, imposes higher premiums and higher deductibles on working families, and imposes a crushing age tax on older Americans. This is wrong.

And, you know, the President ran on a campaign of helping working people and being for the middle class. This piece of legislation is a gift to the richest people in this country and the most powerful special interests and a betrayal of the promise to work for middle class and working families.

I want to end, with the indulgence of the gentlewoman from Washington, you know, we talk about these numbers, and they are staggering: 24 million, \$600 billion. Behind each of those numbers are real people whose lives will be affected by TrumpCare and by the repeal of the Affordable Care Act, individuals whose lives will be devastated, families who will be ruined because they no longer have access to the care that they need. In the richest, most powerful country in the world, this does not have to be the case, and I want to give you two examples.

Just this week I heard from Sara from, Woonsocket, Rhode Island. She wrote to me:

I am writing to you to encourage you to vote against the American Health Care Act proposed by Paul Ryan and the Republican Party. My brother has developmental disabilities and relies on Medicaid for insurance.

Experts who have reviewed this bill have determined that it will ultimately cut funding for people like my brother, but the working class in this country cannot afford the burden that this bill would impose. And the wealthiest among us do not need any more handouts from the Federal Government.

Please vote against this bill.

I had correspondence, again, with another constituent, who talks about the important services that the ACA provided to her family. She was heartbroken at the death of her son Anthony who passed away on August 9 due to an overdose, and she describes Anthony as a compassionate and deep person who, unfortunately, like many Americans, suffered from severe anxiety and depression. To deal with his condition, he started self-medicating with prescription drugs. After returning home from a sober house, he, unfortunately, relapsed and took some designer drugs that he had ordered online, causing him to overdose.

She called me just this week. Anthony's sister Cara also suffers from anxiety and depression, in part because of the post-traumatic stress disorder that she suffered after discovering her brother who had died. Thanks to the ACA, she is able to receive coverage for critical mental health services since her mother doesn't have coverage through her employer.

Like many of my constituents, Cara relies on the coverage she has gained, and she writes:

I am worried for my future without my support system. The discontinuation of coverage would be detrimental to our efforts to combat mental health disorders and the opioid epidemic which continues to plague families and has been such a support to my family.

These are just two examples. We have millions of examples all across this country of people whose lives have been protected and saved and helped because of access to quality, affordable health care. This will undo all of that progress. We have to do everything we can to stop it.

Mr. Speaker, I thank the gentlewoman for yielding and for leading this Special Order hour tonight so we can continue to make sure the voices of the American people are heard and we defeat TrumpCare and protect access to affordable, quality health care in this country.

Ms. JAYAPAL. Mr. Speaker, I thank my good friend from Rhode Island for his incredible leadership on so many issues and for reminding us again that 24 million is just a number, but behind that number are all of the people and all of the stories that will be impacted.

Mr. Speaker, now it is my great honor to yield to the gentlewoman from California (Ms. JUDY CHU), my good friend, the chair of the Asian Pacific American Caucus here in the House.

Ms. JUDY CHU of California. Mr. Speaker, I rise today to voice my strong opposition to the American Health Care Act, or TrumpCare.

TrumpCare would result in 24 million people losing healthcare coverage. In my Pasadena, California, district, nearly 70,000 people will lose coverage. In Los Angeles County, about 1 million people will lose the coverage they have through Medicaid expansion.

Worst of all, this bill would result in skyrocketing healthcare costs, especially for older Americans. It would hurt people like my constituent Patty from Claremont. Patty is 62 and never had to worry about health care because her husband was a union member with a good job, but in one moment, Patty's life was turned upside down.

Last September, Patty's husband passed away, suddenly. In the blink of an eye, Patty was forced to find new insurance for herself and her 20-year-old son who suffers from a preexisting condition. She couldn't afford COBRA and is a few years away from being eligible for Medicare.

Well, thank goodness the ACA came along and she was finally able to get affordable healthcare insurance. She was so relieved.

But what will happen to Patty's insurance under TrumpCare? We only have to look at the CBO's estimate that a 64-year-old making \$26,500 a year could see their health insurance premiums skyrocket from \$1,700 a year to \$14,600. That amounts to over half their income.

For Patty, these changes could mean thousands in out-of-pocket expenses for her hypertension medication, which she needs to take consistently or face life-threatening consequences. Patty would face a situation that so many older Americans would face: premiums that would rise by 20 to 25 percent by 2026. The premiums rise because, in this bill, the GOP created an age tax which allows older Americans to be charged five times more than younger Americans.

Now, in this bill, there is no concrete plan to help older Americans like Patty deal with the rising cost of premiums under TrumpCare. And certainly nothing in this bill will address the enormous deductibles or out-of-pocket costs that they will face if insurance companies can once again offer substandard plans with limited benefits. You know, so many people like Patty are just one accident away from losing coverage.

Why is she and 24 million other Americans going to suffer so that, in this bill, health insurance executives earning over \$500,000 can get a tax break? so that the wealthy can get \$600 billion wealthier? so that 400 of the Nation's richest families can get a \$7 million tax cut every year?

You know, the term "coverage loss" isn't some political tool. It has real life-threatening consequences for people of all ages and incomes across the country.

The bill before us today has been crafted behind closed doors. We have had no hearings on this legislation, and Republicans have not accepted a single Democratic amendment to the bill.

There are just too many American lives at stake. I urge my colleagues to oppose TrumpCare.

Ms. JAYAPAL. I thank the gentlewoman from California.

Now it is my tremendous honor to introduce and yield to the co-chair of the Progressive Caucus, the gentleman from Arizona (Mr. GRIJALVA), a dear friend and somebody that has been on the streets and been a leader on so many issues, from immigration reform to healthcare.

Mr. GRIJALVA. Mr. Speaker, I thank the gentlewoman for not only managing the time, but her leadership and great work in Congress.

Mr. Speaker, I rise to speak about the millions of Americans who will suffer under this oxymoron called TrumpCare. This bill will result in higher costs and less coverage for hard-working Americans, especially the poor and the elderly. The only winners in this bill are the wealthy who are getting their \$600 billion tax cut.

Earlier this week, an official with the American College of Physicians put it best when he said:

In 38 years of advocating for doctors and patients, I have never seen a bill that will do more harm than the AHCA.

This is a powerful statement.

You know, Mr. Speaker, what I can't figure out is what problem this bill is trying to solve. If the Republicans were looking to cover fewer people, make insurance more expensive, and give tax cuts to the rich, then I guess this Republican bill is the answer.

Let's take a quick look at what this bill does or, as my Republican colleagues refer to it, promises kept.

First and foremost, 24 million Americans are going to lose coverage. Let me repeat that, 24 million. That is not only unacceptable, it is cruel.

And even for those lucky enough not to lose coverage, things are not going to be very good.

Under the Republican healthcare scheme, older Americans will be paying five times more. In what world does anyone think that it is a good idea to make health care even more expensive for the elderly? This is one of those crazy but true things about this bill. So this is what the GOP calls promises kept.

Well, let's take a moment to remember what promises were actually made. In an interview with "60 Minutes" in 2015, President Trump promised:

Everybody is going to be covered. I am going to take care of everybody. I don't care if it costs me votes or not, everybody is going to be taken care of much better than they are being taken care of now.

Then just 2 days before the election, Trump went to Sioux City, Iowa, and said:

I am going to protect and save your Social Security and your Medicare. You made a deal a long, long time ago.

□ 1630

So how does this repeal bill stack up with those promises? Premiums will spike 750 percent with far fewer tax credits to help shoulder that burden; 30 million Americans with preexisting conditions would lose the certainty of coverage they have enjoyed under ObamaCare; Medicare will be slashed by \$170 billion; Medicaid will be cut 25 percent. That is \$880 billion being ripped away from the most vulnerable Americans, resulting in 14 million people losing coverage immediately.

So who wins here with TrumpCare? The rich, who will reap \$600 billion in tax cuts at the expense of medical treatment for the most vulnerable and working folks in this country; Big Pharma is a winner who can now look forward to more obscene profits and less oversight; and, of course, the private health insurance companies, who, once again, will be in total charge of America's health care.

Who loses? Hardworking, regular folks who simply can't afford to underwrite a tax cut for the rich at the expense of their health.

Take my constituent, Shawn, for example. He wrote me to share his ACA story. In 2006, Shawn was diagnosed with HIV and a rare heart condition, and his premiums skyrocketed from \$123 a month in 2005, all the way up to \$1,473 a month in 2012. That is an average increase of between 35 and 40 percent per year. At the same time, his deductible climbed to \$2,900, meaning his insurance wouldn't offer him a dime until he coughed up nearly \$3,000 first.

When ObamaCare kicked in in 2014, Shawn had at least a dozen plans to choose from. He selected a platinum plan which delivered better coverage than he previously had for only half the price that he had previously been paying. Let me repeat: because of ObamaCare, Shawn started paying half the price for a better plan. How was it better? As Shawn put it, he no longer faced lifetime caps; he had free wellness visits included in his coverage; instead of a nearly \$3,000 deductible, he now had just a small copay.

If the ACA is repealed, Shawn will be uninsured for the first time in his life. For the first time in 54 years, Shawn will be forced to pay out of his own pocket for lifesaving medications. His HIV medications alone cost nearly \$30,000 per year—that is three times as much as he pays right now for all of his medical expenses. If he is hospitalized for his heart condition—which has occurred already twice—he will incur tens of thousands of dollars in additional charges. In short, under the Republican's healthcare scheme, Shawn will be financially ruined.

Mr. Speaker, this is utterly unacceptable. The American people deserve access to affordable, accessible, and high quality health care. TrumpCare achieves the opposite. It is a bad deal and a threat to the well-being of our Nation and our people. Beyond that, it is shameful and inhumane.

Mr. Speaker, I urge my colleagues to oppose TrumpCare in its entirety and vote it down tomorrow.

Ms. JAYAPAL. Mr. Speaker, I thank Representative GRIJALVA.

I am so proud to introduce my colleague from Massachusetts, Representative JOE KENNEDY.

Two weeks ago, during the Energy and Commerce markup on TrumpCare, the gentleman actually forced Republican lawmakers to admit that the bill—their bill, the TrumpCare bill—would not guarantee essential healthcare benefits for the millions who are covered under Medicaid expansion, and, later, the gentleman went on to give an incredibly compelling speech about this bill not being an act of mercy but being an act of malice. I hope that the gentleman is now going to tell the American people exactly why he said what he did.

Mr. Speaker, I yield to the gentleman from the State of Massachusetts (Mr. KENNEDY).

Mr. KENNEDY. Mr. Speaker, I want to thank my colleague for adding her voice on such an important issue before our country today and for leading our efforts here this afternoon on the House floor.

There are an awful lot of important components to this bill that we are debating now and that will supposedly come before us tomorrow afternoon. One of the critical pieces of it is how we are going to treat people suffering from mental illness.

Now, the bill itself does a number of things across insurance marketplaces and across Medicaid and Medicaid expansion, but I think it is critically important that we look at this through the framework of what health care is supposed to be all about. Health care, at least from my understanding, boils down to one simple principle. It is how we treat each other in our time of need and this commitment that we make as a country to each other, that, yes, I care about you and your family and want to make sure that you get the care that you need when you need it. Because with health care, at some point, I am going to need that same care as well: a loved one of mine, my children, my family members, and I hope that you would be there for me the same way that I would be there for you.

So if you look at this bill through that prism, one of the pieces that stands out is the fact that, for the Medicaid expansion population, about 11 million people across our country, this bill strips what is called the essential healthcare benefits from those 11 million people. Now, that is a bureaucratic term, but it means some of the most basic aspects of health care: maternal care and newborn care, preventive services, wellness, ambulatory care, and, yes, mental health services and addiction, behavioral health.

So what does that actually mean? It means that because of existing legislation, the Federal law, mental health

parity, which says that if mental health benefits are, in fact, offered as part of a healthcare package, insurance package, that it has to be offered in the same way that physical health care is. You should treat your access to behavioral health care the same way we would treat access to health care if you needed cancer treatment or a broken leg. But the mental health parity law does not require mental health benefits to be offered at all. The Affordable Care Act, however, says that in order for a plan to be qualified, it does have to offer an essential health benefits package, included in that being access to mental health care.

So those two laws together work in tandem to have created a massive increase in access to behavioral health and mental health services, including, critically for the moment that we are in our country, access to opioid treatment.

What this bill does is strip those essential benefits, including access to addiction services and mental health care, from that essential benefits package and says to the States: Good luck, you can pay for them if you want to, providing nowhere near the sufficient funding to cover all of the demands that our Republican colleague says the funding will be there for.

Now, to make matters even more convoluted in this, it was clear, during the debate in our committee 2 weeks ago for 28 straight hours, that some of our colleagues actually thought these protections were maintained when we pointed out that, in fact, they were stripped. There was then a different version of this bill that was brought forth for consideration called the manager's amendment. That manager's amendment happened to reinstate those benefits, which was great, and I applaud my Republican colleagues for doing so, aside from the fact that they then realized that they included those benefits and they offered an amendment to strip them back out, just in the past 36 hours, recognizing that there was a bill that they thought offered these benefits—the package of essential health benefits—for 11 million people to begin with, they found out that it didn't, in fact, offer it; they fixed it and put them back in a bill, realized they did it inadvertently and took it out again and are now laying that bill supposedly before our consideration tomorrow.

If health care is, in fact, that commitment we make to each other in our time of need, how does this bill answer that question? The average cost of a birth in this country is roughly \$10,000. Medicaid itself pays for half of the births in our Nation. Maternal care and newborn care are covered under the essential health benefits, but not anymore for the Medicaid expansion population. For that population, having a child could very literally bring you to bankruptcy. That is the bill that this Republican Congress is putting forward for your consideration tomorrow.

That is one of the many reasons why I urge my colleagues to vote “no.”

Ms. JAYAPAL. Mr. Speaker, I thank Representative KENNEDY so much. As the gentleman was talking, I was thinking about the simple rule that we are all better off when we are all better off. I appreciate everything that you just said.

Mr. Speaker, it is a great honor for me to yield to the gentleman from the great State of Minnesota (Mr. NOLAN).

Mr. NOLAN. Mr. Speaker, I thank the gentlewoman for that introduction.

I want to thank my colleagues for presenting their profound thoughts on this most important legislation that we will consider tomorrow. The simple truth is that what this bill does is it removes 24 million people and takes them away from having affordable health care and health insurance, while, at the same time, giving \$600 billion in tax cuts for the richest people in America. Some pundits have described it as one of the biggest transfers of wealth and travesties perpetuated upon the American people in American history.

I am calling upon the Republicans here in this Chamber and President Trump to withdraw this legislation, sit down in a bipartisan way—the way this Congress operated for several hundred years under open rules—see what we can do to fix what is wrong with the American healthcare system, not do away with it and scrap it in the devastating manner that they have chosen to do so.

The simple truth is, as I said, this guts Medicaid, and it guts health care. Under this \$600 billion tax break, think about it, if you make \$1 million a year, every year you are going to get a \$67,000 a year tax cut. Imagine that. That is more money than the average person makes in America in a year, and they are going to get that every year going forward in perpetuity, while we are saying to a young family who is struggling maybe because someone in the family has cancer or maybe somebody got hurt or injured in an accident, oh, that is going to cost too much money to insure you, you are one of the 24 million who we are getting rid of.

What kind of a country is it that would do something like that? My colleague, Mr. KENNEDY, I thought, stated it so well. We are all in this together. That is what insurance does. Life is perilous at best. We don't know who is going to get sick. We don't know who is going to have an accident. It may be when you are elderly; it may be when you are young. That is what health care and health insurance is all about, coming together and making sure that we all are cared for and get the care that we need when we need it.

Senator KENNEDY talked about preventive care. If you can catch prostate cancer or if you can catch lung cancer at a stage I or a stage II level, you save a life. But you have to have insurance to go do that and see your doctor. If

you don't have insurance, guess what? You don't get a diagnosis until it is at the third or fourth stage level, at which point it is too late, costs tremendous amounts of money to treat, and, most likely, the prospects for survival are not good.

Mr. Speaker, I call on the President and my colleagues, please, the President in particular, honor the promise that you made to the American people in your campaign which resonated with enough people to get you elected President of the United States. Stand up for the elderly, stand up for urban and rural, stand up for all Americans, stand up for rural communities, and rural hospitals. Do the right thing, and let's open this process up so we can fix what needs fixing and stop this devastating attack by repealing and so-called replacing the Affordable Care Act.

Ms. JAYAPAL. Mr. Speaker, I thank the good gentleman from Minnesota for his tremendous work and for his words. As the gentleman spoke, I think about all the names that we could call this bill that is before us. We can call it TrumpCare, we can call it the pay more get less bill, and we can call it the broken promises bill. But I think what the gentleman's words have shown us is that this is a bill that is going to deeply affect 24 million Americans across the country and tear them off of their health care, and that is just not acceptable.

Mr. Speaker, I yield to the gentlewoman from California (Ms. BROWNLEY). It is a great honor to introduce my colleague who is a champion for so many issues.

Ms. BROWNLEY of California. Mr. Speaker, I thank the gentlewoman from Washington.

Mr. Speaker, after 7 years of demanding repeal and replace, the very best that the GOP could do was to put forward a bill to eliminate health care for 24 million Americans. Under TrumpCare, over 44,000 residents in my district will lose health care completely.

□ 1645

I want to talk about a different population that we don't address as often. Many of these residents are veterans and their families.

Paralyzed Veterans of America today reminded me that today many vets rely on Medicaid for their health care. TrumpCare undermines the safety net for our veterans and their dependents and their caregivers.

According to PVA, the total number of veterans without insurance dropped very sharply in recent years, yet TrumpCare cuts more than \$800 billion from the Medicaid program, which many veterans and our military families turn to for care. Worse, in their rush to rip health insurance away from tens of millions of Americans, the manager's amendment to TrumpCare could deny tax credits to millions of military veterans.

Mr. Speaker, veterans are among those that TrumpCare would hurt.

There are thousands of veterans in my district and thousands of veterans in every district across our great country.

My colleagues on the other side of the aisle should think long and hard before they take this critical, life-saving care away from those who need it most: our veterans who have served our country so bravely and so patriotically and whom we have made a solemn promise to.

Ms. JAYAPAL. Mr. Speaker, I yield to the gentlewoman from Texas (Ms. JACKSON LEE), my colleague on both the Judiciary Committee and Budget Committee and a champion for people of color and folks across this country.

Ms. JACKSON LEE. Mr. Speaker, I am delighted to join the Congressional Progressive Caucus, on which I serve as a vice chair. I remember this experience less than a decade ago when we worked so hard to have the Affordable Care Act.

For many, you are seeing this poster for the first time. I think I need to give you a little journey down memory lane as we talk about why we are so vigorously opposing what would seem to be new and fresh ideas.

First of all, let me say the good thing about the Affordable Care Act is that it is not a respecter of economic standing as relates to the benefits of health insurance. We were able to grant every American the right to have insurance that did not penalize you for being a woman, penalize you for having a pre-existing condition. In fact, it did lower premiums.

We realize that in certain areas that is one of the beginning aspects of a bill that is only 7 years old, but one of the important points is that we have given you insurance that has more benefits than it ever had 10 years ago, 15 years ago. More importantly, working people who happen to be of low income and who are no less able or dignified or equal in this Nation now have insurance.

It is insurance. The underpinning of it is Medicaid, but it is insurance. It allows families, pregnant women, and children to have insurance, people who are working. Then, on the other side, it has help for the blind, the disabled, as well for those in nursing homes. Remember, people in nursing homes have worked. We give them the ability to live in dignity.

Unfortunately, to the contrary, what I am seeing now, just coming out of the Cloakroom, is a hustle and bustle of negotiations and meetings, going in and out of meetings, going to the White House, trying to corral these last votes. Some of these individuals want it to be made worse, and they are holding their ground.

But I tell you what is missing in all of this. What is missing is that what we did almost 10 years ago was have hundreds, maybe thousands, of hearings or townhall meetings in our districts. We had 79 bipartisan hearings in the House, 453 hearings in the Senate. In the House, we had over 181 witnesses

and 239 considered amendments. We believed in listening to the American people, many of whom did not understand, but we wanted to get it out.

In the dark of night, this bill has come. There are amendments coming by the day. I will be leaving here and going to the Rules Committee to try to understand what is in the bill.

To the American people, what you can clearly see that is in the bill right now is that we are paying more for less. You are getting \$880 billion taken out of the Medicaid that is used to keep people whole after they have worked—those in nursing homes, the blind, the disabled, or other things that may have occurred—as well as those who are taking care of children and who are pregnant women. Twenty-four million will lose their insurance right now, today, as that bill is passed. Overall, in 2026, 52 million Americans will be uninsured. You can't be plainer than that.

Then what saddens me the most, besides the \$880 billion coming out of your insurance, they give a \$600 billion tax cut to 1 percent of the richest Americans, whom I would venture to say, getting \$57,000 per family, they would say to you: Take it back and help all of America.

The age tax, if you are 50 to 64, you are paying a penalty—not 85, but 50 to 64. They can't get rid of that. How are you going to pass a bill that penalizes?

I have indicated about \$880 billion for Medicaid. Then, of course, the tax relief for people who do not want it.

I say that your patriotism today is letting this see the light of day. Let's debate it and discuss it. Let's talk to States like Kentucky and West Virginia and those States that have taken expanded Medicaid. Let's talk to families, like I have just done today, with children who are only being taken care of with their catastrophic illnesses, with smiles on their face, and homebound, because they have Medicaid as their insurance.

That is why we oppose the TrumpCare bill. No matter how many backdoor meetings President 45 can take care of—I wish, maybe, it started earlier, before he attacked President Obama. But, in any event, with all of these meetings, we are still at a point where we don't know what the bill is doing for people that is good, but we do know what it is taking away from people. I just ask that we stop and do this right to save lives.

I thank the gentlewoman for her leadership.

Ms. JAYAPAL. Mr. Speaker, I yield to my colleague from the District of Columbia (Ms. NORTON).

Ms. NORTON. Mr. Speaker, I thank my good friend for the excellent job she is doing in leading this Special Order.

I don't know about you, but the uninsured in my district are down to 3.8 percent. If you think I am going to let the Republicans take away near universal health care from my district, the District of Columbia, without a

fight, just watch me, and watch my colleagues.

We had a healthcare townhall. Unlike some of the townhalls of my colleagues, there were not people jumping up saying: Why are you taking away my health care? Instead, they were people like Debbie.

Debbie is a lifetime sufferer of asthma. She also has diabetes. She reached her cap. That meant that the medicine she was on, which cost \$10,000 a month, would have to be paid by her. She worked every day. How many of you—how many of us—could pay \$10,000 a month, no matter what job we have? That, along with her diabetes, makes her a paradigm of the kind of person whose life and death depends on this bill.

I want to just say a few words not about all of the important information you have had, but about what I call the worst of the worst.

First, let me congratulate my Republican colleagues on doubling down on the number without health care because you double the number without health care. As we are rising with the number who have health care, you now turn downward. We can't possibly live with that, and I don't think the American people will allow you to get away with it.

I think about our hospitals, and people say: Why should we pay any attention to the hospitals? Well, when we get back in the era of uncompensated care, what you will have is the Federal Government will never compensate your hospital, so you will compensate your hospital. We are back in the era of free health care, except there is no such thing as free health care. You and I will be paying for it out of our pockets.

What they do to the tax credits is shameful. Flat tax credits, unrelated to the costs, replace the kind of tax credits we have in the Affordable Care Act, which are just, as you might expect, up and down according to the value of insurance.

What good is a flat tax credit unrelated to the cost of insurance or to your income? Do my Republican colleagues really think they are going to fool anybody with those kinds of replacements?

What is perhaps worst of the worst is the work requirement. You get sick, you can't afford to work, you have got to be on the Affordable Care Act, and you need Medicaid in order to do it. They tell you that you have got to go to work in order to—while you are sick, I guess—get your Medicaid. Get sick, go to work, and qualify for health care under the Republican plan.

Those are just some of the worst of the worst. I have got a whole list here, but I thought it important to focus on who gets hurt and why, and why we are simply not going to let that happen.

Ms. JAYAPAL. Mr. Speaker, Ms. NORTON is right: the uninsured rate in my home State of Washington got cut more than half. So we are down to not

quite as low as you, but 5.6, I think now, compared to over 13 percent before the Affordable Care Act.

I often get to co-chair this Special Order hour with my good friend, a brilliant colleague. Mr. Speaker, I yield to the gentleman from great State of Maryland (Mr. RASKIN).

Mr. RASKIN. Mr. Speaker, I thank Congresswoman JAYAPAL for her leadership on this Special Order.

I think the message is getting through to the American people: 24 million of us are about to lose health care if this legislation goes through.

In my home State of Maryland, 375,000 people are estimated to be on the chopping block in terms of their health insurance. In my district, the Eighth Congressional District—Montgomery, Frederick, and Carroll Counties—we could have 75,000 or 80,000 people lose their health care.

We were able to cut the uninsured rate in half with passage of the Affordable Care Act 7 years ago, and now they want to turn the clock back and take us in exactly the wrong direction.

If a foreign power like Russia, for example, tried to throw 24 million Americans off of their health care, we would consider it an act of sabotage, aggression, and war, but this is something that is happening inside the country. Nobody knows why they want to do that to older people with this age tax, why they want to do it to children, to people who have special health needs, to the sick.

It is also getting through that there is going to be \$600 billion that travels upwards in America through a tax break to the wealthiest Americans. That is \$600 billion that is moving upwards. This is not a healthcare plan, primarily. It is a wealth transfer plan, while we toss millions of our co-citizens to the curbside.

Seven years ago, we passed the Affordable Care Act. Millions of Americans have gotten health care for the first time, dramatically improving public health in lots of different ways, making sure that people could not be denied insurance coverage because of a preexisting condition, making sure that people in their twenties could stay on their parents' plan, ending lifetime insurance limits, ending annual limits, requiring insurance plans to pay for preventive services like flu shots and cancer screenings and mammograms, dramatically improving the public health. This has been a great success.

Tom Paine once said you cannot "make a man unknow his knowledge, or unthink his thoughts." The American people know that we have made dramatic progress under the Affordable Care Act. We need to be moving more in the direction of covering more people and improving quality and reducing people's premiums and copays and deductibles.

This legislation, the repeal nightmare, goes in exactly the wrong direction. It jacks up everybody's premiums, increases the copays and

deductibles, while throwing millions of people to the sidelines.

□ 1700

I want to make one final point, which is the message has gotten through. The public opinion polls are showing that the American people are turning sharply against this terrible repeal plan, which means here in Congress the organizers of the plan are getting increasingly desperate, and they are making deals.

One of the deals that they have made with some upstate Republicans apparently is colloquially known around here as the Buffalo bribe or the Kinderhook kickback or the Hudson hustle. Someone called it today the Empire State enticement or simply Niagara calls.

There are some Republicans in upstate New York who are very nervous about voting for this bill, so what they have extracted is a promise, a very special provision that doesn't apply to the other 49 States. It applies only in New York, and it would say that New York State alone cannot assess its counties to participate financially in the Medicaid system. There are lots of other States that do it, but only New York could not do it. It could not assess the counties, except it could assess any jurisdiction with more than 5 million people.

Gee, what do you think that is? Maybe New York City.

Now, the problem with this other than it being sordid and unseemly—this Buffalo bribery, this Hudson hustle—is that it is unconstitutional because the Federal Government can try to persuade States to do something by offering money, but it cannot extract a concession through coercion, and it cannot treat one State differently from every other State. It violates the principle of equal sovereignty.

I would just say, Congresswoman JAYAPAL, this legislation is not only reactionary, taking us back to a past nobody wants to go back to, and not only dangerous, but it is also unconstitutional because of the Buffalo bribe that is built into it.

Ms. JAYAPAL. Mr. Speaker, once again, it looks like we need to school our colleagues on the Constitution. I thank Mr. RASKIN for consistently doing that.

Now it is a great honor to yield to the gentlewoman from Connecticut (Ms. DELAURO), the dean of the congressional delegation, a champion for women and families, paid leave, and health care across our country.

Ms. DELAURO. Mr. Speaker, I am so honored to join my colleagues here tonight. I thank the gentlewoman for taking the lead in this effort.

There really is such an urgency to this debate and to what is happening on the floor of this House. I rise to voice my opposition to the repeal of the Affordable Care Act, but the urgency of the debate is because tomorrow,

in this Chamber, in the people's House, House Republicans are prepared to vote on a healthcare plan which is supported by President Trump and by Speaker PAUL RYAN.

What is at stake on this vote tomorrow in this House? What happens to people in this country with this vote tomorrow?

There is real clarity here. We will see families pay higher premiums and higher deductibles. This plan will increase out-of-pocket costs to working Americans. In addition to that, older Americans will be faced with what has been described as an age tax. Those Americans who are 50 to 64 years old will pay premiums five times higher than what others pay for health coverage, no matter how healthy they are.

There will be less coverage because we are going to take away health care for 24 million hardworking Americans. And for older Americans, once again, something that they rely on in terms of healthcare coverage is what happens to Medicare. Well, Medicare and the trust fund for Medicare will have a shortened life by 2 or 3 years because it takes \$170 billion from the Medicare trust fund.

To do what? What does all of this mean? Who benefits from this legislation that my Republican colleagues want to pass tomorrow and who are strong-arming their own Members to vote for it? Who benefits?

Don't take my word for it, but the Joint Committee on Taxation estimates that two of the tax breaks in the repeal bill will give a \$275 billion tax cut to individuals with incomes over \$200,000; \$190 billion in tax cuts for insurance companies and drug companies who are making a fortune, for medical device manufacturers who are making a fortune.

And so what is the balance?

It is working Americans, older Americans who are going to pay increased costs for premiums and deductibles, and the wealthiest corporations and individuals are going to get a \$600 billion tax cut.

I will make one final comment because this is where the values of this Nation come into play, and when you think about a young woman in my district, Mnikesa Whitaker. She is 36 years old. She has an autoimmune disease known as scleroderma. She cannot breathe without an oxygen tank. She cannot work any longer at 36 years old. What she says to me is, without the Affordable Care Act, each day is one day less in her life. We cannot let the Mnikesa Whitakers all over this Nation down in order to be able to take care of tax cuts for the wealthiest Americans and increase the costs to working Americans and older Americans.

We have an opportunity to say no tomorrow and defeat this Republican healthcare plan supported by the President and the Speaker of this House, which will only do great damage to the health care of the people of this great Nation.

Ms. JAYAPAL. Mr. Speaker, I thank my good colleague from Connecticut so much for that incredibly compelling testimony of why we cannot let this bill pass.

Let me summarize what you heard in this last hour from Members across our country who are terrified. Frankly, this plan—TrumpCare, the pay more get less plan, the broken promises plan—might actually pass. We have to make sure that it does not pass.

So, in summary, TrumpCare strips healthcare coverage from 24 million Americans. It cuts \$880 billion—that is almost a trillion dollars—from Medicaid expansion, and it gives \$600 billion in tax breaks to the wealthiest Americans and corporations while cutting benefits for seniors, working families, and the most vulnerable among us.

Frankly, we don't know everything it does because there have been amendments after amendments that have been passed today. We still don't know what the full impact of this bill is, yet they are pushing through a vote tomorrow if they can get enough votes to pass it.

TrumpCare is going to raise the cost of health care by about \$14,000 for those between the ages of 50 and 64. That is the age tax you have heard about on the floor tonight. And it is going to raise premiums for almost everyone. It puts a 30 percent penalty for getting health care to anyone who suffers any kind of a catastrophic event that throws you off of health care. If you lose your job and somehow you end up without health care for a couple months, you are going to have to pay 30 percent more in order to get your health care back.

You heard from Representative KENNEDY about mental health, you heard from Representative ELEANOR HOLMES NORTON about work requirements, and that is just a piece of what this TrumpCare bill does.

Tomorrow I will join my Democratic colleagues and hopefully enough Republican colleagues who know that our job is to make sure we provide health care for everyone across this country. Tomorrow I will vote "no" for the 24 million people who will lose their coverage. I will vote "no" for the almost 15 million people who will lose their coverage under Medicaid expansion alone. I will vote "no" for the millions of low-income women who rely on services from Planned Parenthood. I will vote "no" for the tens of thousands of people who will literally die each year if the Republicans succeed in repealing the health care that we have now.

Let's be clear that the Republican majority has been passing legislation and voting to repeal the Affordable Care Act for 7 years, yet they could not come up with a plan that would, in fact, do what they promised, which is to make sure that we are covering more Americans at lower prices. As my friend, Representative RASKIN, said, this is not a healthcare plan. A

healthcare plan would cover more people. This is a tax plan to take the benefits that working families were receiving on healthcare coverage across the country and convert it into tax benefits for the wealthiest, \$600 billion in tax benefits.

People around the country are calling in to say if you care about the American people and if you care about providing health care for all of us, this is a bad plan, you should not vote for it. And Republicans are hopefully listening to constituents across the country, to their Governors in Republican States, Republican Governors who have said how much Medicaid expansion has helped their States. They have asked and pleaded for people to keep what we have; to make it better, yes, but not to strip \$880 billion away.

Just recently, PAUL RYAN, the Speaker of our House, was quoted as saying that he has been dreaming about yanking health care away from the people who need it the most since he was "drinking at a keg."

This is what he said: "So Medicaid, sending it back to the states, capping its growth rate, we've been dreaming of this since I have been around—since you and I were drinking at the keg."

Well, I don't know what he was thinking about when he was drinking at the keg, but I can tell you that what we have been dreaming about as Democrats, as people who care about the health care of people across this country is that we cover people, that we don't put anyone in a position where they are one healthcare crisis away from bankruptcy, that we make sure that kids can get asthma inhalers, that we make sure that grandma and grandpa can go into the nursing home and get the care that they need. If we pass this bill tomorrow, those grandparents are not going to have the care that they need. Nursing homes are going to shut down. We are going to take away jobs from rural areas, rural hospitals across this country.

Mr. Speaker, today, as we close this Progressive Caucus Special Order hour, I say to my colleagues on the other side of the aisle that I believe we all have the interests of the American people at heart, and if we do, then I hope we will stop this TrumpCare bill from moving forward tomorrow.

Mr. Speaker, I yield back the balance of my time.

CONGRESSIONAL TERM LIMITS

The SPEAKER pro tempore (Mr. MARSHALL). Under the Speaker's announced policy of January 3, 2017, the gentleman from Wisconsin (Mr. GALLAGHER) is recognized for 60 minutes as the designee of the majority leader.

GENERAL LEAVE

Mr. GALLAGHER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous materials on the topic of my Special Order.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Wisconsin?

There was no objection.

Mr. GALLAGHER. Mr. Speaker, I was back in Green Bay, Wisconsin, the past week. Someone asked me: What is the biggest surprise you have encountered since being in Congress?

I said: I will give you a negative surprise and a positive surprise. The negative surprise was how much of our time is spent here in Congress doing things that really, in my opinion, have nothing to do with the hard task of legislating, running around to an endless series of meetings that distract us from the hard work of the floor of coming together and fixing problems.

I said: But on the positive side, I have been blown away by the quality of talent, the commitment to service, and just the incredible collection of experiences we have in the freshman class of the 115th Congress—on both sides of the aisle, by the way.

I think we have a unique opportunity to seize this moment and send a message to our citizens back home that we are ready to change politics as usual and we are ready to work together to get things done. So today we would like to speak about that in general and in particular about term limits, an idea whose time has come.

In my 10 years in the Marine Corps and during two deployments to Iraq, I saw brave young men and women from across this country working together, doing whatever it took to accomplish the very difficult mission.

□ 1715

I would submit that our constituents from across the country sent us here to accomplish a very difficult mission. They sent us here not to treat our time here as a career, but rather like a deployment, an act with a sense of urgency to get things done. And, my gosh, do we have a list of problems that we need to fix.

Our healthcare system in this country has failed the American people, the Federal debt and deficit continue to balloon, taxes are driving out businesses and jobs, and our foreign policy is in shambles right now. These issues aren't new, yet they never seem to get fixed. Why is that? Well, I would argue because Washington isn't working for the American people. The people's House has become distracted and distorted from its original intention. It is up to us—the new Members of Congress—to fix that and restore the balance that the Founders and the Framers had in mind—the concept of the citizen legislator—people from all walks of life who would put aside their primary responsibility and come and embark on a season of service and then return home when that season was done.

Today, I am proud to be joined by my fellow freshmen Members of Congress who are going to speak about term limits. It is my honor to welcome a man who served his country for a career in

uniform in the Air Force. He could have enjoyed a nice retirement and had some relaxing time, but he chose to step up and serve yet again in Congress.

Mr. Speaker, I yield to the gentleman from Nebraska (Mr. BACON), my distinguished colleague, the pride of Omaha, Nebraska, a general, now Congressman.

Mr. BACON. Mr. Speaker, I want to thank my friend from Wisconsin for organizing this. He is a wonderful freshman Member of the class.

I rise today in support of congressional term limits.

In 1846, when then-Congressman Abraham Lincoln was elected to the U.S. House of Representatives, he was part of a freshman class that made up one half of the 35th Congress. In other words, half of the Congress were new Members when he got elected. Today, in the 115th Congress, our freshmen class of 55 Members make up less than 20 percent of this body. But here is a more stark number.

In the last election, 97 percent of House incumbents won reelection—97 percent. Only 3 percent of the challengers defeated an incumbent. I was fortunate to be one of the exceptions to these overwhelming odds.

Since Abraham Lincoln, our country has grown, this institution has grown, and so has the length of time Members stay here. As a person who is new to Congress and is new to politics, I can tell you the reason why congressional favorability ratings are now at 8 percent. Our constituents feel that we have lost touch. The longer we stay here in Congress and don't cycle back to our home districts, the more out of touch we are perceived.

To restore America's trust in Congress, we must institute term limits. Our Forefathers intended the House of Representatives to be an arm of government closest to the people, and to be the purest embodiment of a representative democracy. Members of the people's House were to come from different walks of life and careers to better shape the direction of our great country. Members of Congress were to feel obligated to serve by a sense of civic duty rather than a desire to pursue a career in public office. We have lost sight of this intent.

The American people deserve new ideas from new faces here in Washington. This is the principal reason why I am here today with this great honor bestowed on me from the people of Nebraska's Second District. Congressional term limits would ensure that we send more successful farmers, successful teachers, business leaders, doctors, nurses, and veterans to Washington so that we can address problems with a firsthand perspective. We need more people in Congress who were successful prior to becoming a politician. We need to restore this House as the people's House.

Mr. GALLAGHER. Mr. Speaker, listening to my colleague's remarks, I was reminded of what another general,